

**NC COMMISSION FOR MENTAL HEALTH,
DEVELOPMENTAL DISABILITIES AND
SUBSTANCE ABUSE SERVICES**

Clarion Hotel
320 Hillsborough Street
Raleigh, NC

November 15, 2007

Attending

Commission Members: Pender McElroy, Anna Marie Scheyett, Ph.D., Laura Coker, Clayton Cone, Dorothy Rose Crawford, Mazie Fleetwood, Ann Forbes, George Jones, Martha Macon, Martha Martinat, Connie Mele, Emily Moore, Jerry Ratley, Thomas Fleetwood, Marvin Swartz, MD, Carl Shantzis, Ed.D., CSAPC

Commission Members Excused: Lois Batton, Dr. William Sims, Floyd McCullouch, Pearl Finch, Pamela Poteat, Ellen Holliman, Dr. Richard Brunstetter, Judy Lewis

Ex-Officio Committee Members: Karen McLeod, Ellen Russell

Division Staff: Steven Hairston, Denise Baker, Marta T. Hester, Monica T. Jones, Lynell Otto, Andrea Borden, Susan Kelley, Rebecca Carina, Carol Donin, Phillip Hoffman, Helen Wolstenholme

Others: Dempsey Benton, Secretary, NC Department of Health and Human Services (DHHS), Dr. Charlie Bernacchio, Geraldine Stacey, Lance Leonard, Cora Crisp, Paula Cox Fishman, Mary K. Short, Janell Albany, Ann Rodriguez, Terry Miller, Ken Greenberg, David Swann, Pat Greenberg, Diane Pomper, Jason Laws, Larry Swabe, William Hancock, Wayne Hancock, John Tote, John L. Crawford

Handouts:

- Article *“Integration of Psychiatric and Vocational Services: A Multisite Randomized, Controlled Trial of Supported Employment”*
- Dr. Bernacchio’s Presentation on Recovery, Evidence-Based Practices and Relationship Variables in Effective Practice
- Revised Agenda – November 15, 2007 Commission Meeting
- Session Law 2007-410, HB 628, *An Act to Create a Uniform Co-Payment Schedule for MH/DD/SA Services as Recommended by the Joint Legislative Oversight Committee for Mental Health Developmental Disabilities, and Substance Abuse Services*

Mailed Handouts:

- November 15, 2007 Commission Agenda
- Draft August 16, 2007 Commission Meeting Minutes
- Draft July 11, 2007 Rules Committee Meeting
- Draft July 12, 2007 Advisory Committee Meeting
- Draft Workforce Development Initiative Report
- NC Commission on Workforce Development: Direct Support Professional Work Group Report
- August 16, 2007 Commission Meeting Handouts (PDF Attachments)
- October 17, 2007 Rules Committee Handouts (PDF Attachments)

Call to Order

Chairman Pender McElroy called the meeting to order at 9:35am. Chairman McElroy proceeded to welcome everyone and asked the Commission members, Division staff, and other attendees to introduce themselves. He also issued the ethics reminder; no member responded as having a conflict of interest or an appearance of conflict of interest.

Approval of Minutes

Upon motion, second, and unanimous vote, the Commission approved the minutes of the August 16, 2007 Commission meeting with the following change.

Page 11 – Minutes need to show that there were two (2) abstentions to the vote.

Chairman's Report

Chairman McElroy stated that several members of the Commission have expressed concern that there are too many providers serving on the Rules Committee; currently, there are nine provider representatives serving as Ex-Officio members of the Rules Committee. He added that there were not enough advocates and family members of consumers of mental health, developmental disabilities and substance abuse services on the Rules Committee. Chairman McElroy also announced that he would be open to suggestions from members of the Commission with regard to advocates, family members or consumers to serve on the Rules Committee. Recommendations, along with resumes of those recommended, should be sent to him via email.

Chairman McElroy formally recognized and congratulated Dr. Anna Scheyett for obtaining her doctorate degree. He also noted an article authored by Dr. Marvin Swartz, Dr. Scheyett, Mimi Kim and Jeffrey Swanson entitled “*Psychiatric Advanced Directives: A Tool for Consumer Empowerment and Recovery*” published in the *Psychiatric Rehabilitation Journal* Summer 2007.

Chairman McElroy reported that Pamela Poteat, a recent Senate appointee to the Commission, has not attended any meetings due to physical problems. Chairman McElroy further stated that Ms. Poteat has expressed interest in the Commission and hopes to be able to attend a meeting soon. He also announced that Mike Moseley and Leza Wainwright would not be presenting at the Commission meeting since they are scheduled to speak at the Joint Legislative Oversight Committee on Mental Health, Developmental Disabilities and Substance Abuse Services (LOC) meeting.

Secretary's Report

Dempsey Benton, Secretary, NC DHHS, gave a brief presentation to the Commission. Secretary Benton described his visit as designed to accomplish the following objectives:

1. To introduce himself to members of the Commission
2. To describe his “marching orders” from the Governor
3. To identify major issues being addressed within DHHS and
4. To permit input from the Commission in matters related to the Secretary's activities

Secretary Benton described Mental Health Reform and Implementation as a top priority and noted that the Governor has instructed him to address the following issues.

- Management of program and business processes/practices such accounting and information technology (IT) functions. This will also include an assessment of business functions/transactions. For example, providers have expressed concerns regarding the amount of paperwork required for the endorsement process. It is possible that administrative

processes/paperwork demands may be decreased. However, it is unlikely that there will be a corresponding decrease in the documentation required. The goal is to streamline business functions to decrease time spent process paperwork and increase time spend on service delivery.

- Better delineations/definitions of roles/responsibilities of participants designed to increase accountability and decrease confusion.
- Assessment of the operational and financial status of programs to include a comparison of actual versus anticipated expenditures. He noted, for example, that expenditures for Community Support Services have greatly exceeded annual projections. The Department's challenge, from a financial standpoint, is to operate that program within appropriations included in the budget.
- Overview of the Endorsement processes and appeal issues stemming, in part, from post payment Clinical Reviews. The LMEs undertook review by clinicians of the services provided here in the previous eight or nine months by the providers to look at whether there was agreement that all those services were medically necessary. The Department found a wide range of compliance that ranged from very good to poor. The Department has had to acknowledge the results of this effort in their management of programs. Some actions have been taken and the Joint Legislative Oversight Committee on Mental Health, Developmental Disabilities and Substance Abuse Services will be hearing them today. These actions are related to primarily the Community Support Program and the Department's management of the program. Several actions recommended and approved include:
 1. suspending the addition of new providers entering into the network with the exception of those already in the approval process and except were the LME specifically identifies a service that is not covered and is critically necessary;
 2. initiating steps to put in place new rules for minimum standards or qualifications of providers;
 3. identifying providers through the post payment clinical review who had a negative record in that review (the Department has begun to take steps to initiate recoupment of some of those payments based on that clinical review);
 4. making proposal in the area of community support in the school system;
 5. retaining a national consulting group, The Mercer Consulting Group, to lead in the review of the Department's organizational structures and business practices to see how or if there are ways to better manage those functions; and
 6. implementing crisis services program in all of the LMEs, which is a top priority for the legislature. The Mercer Group will begin work later this month and will be working with the Department through the spring.
- Secretary Benton stated that another area that has emerged as an overriding concern to him is in the area of substance abuse. Secretary Benton further stated that it appears to be a pervasive issue which crosses not only the service to the individual as a need, but also many of the other areas of the community and system, such as:
 - how individuals enter the emergency room and how fast they can get out to the appropriate treatment area;
 - how law enforcement deals with those challenges when they encounter them in their communities; and

- how they are handled when they come to the state treatment system.

Secretary Benton stated that fifteen to thirty percent (15% - 30%) of the individuals coming into the state hospitals have substance abuse issues and they need to be in another treatment mode. Two of the state drug abuse and treatment centers are being expanded: Walter B. Jones ADATC has added additional beds and R.J. Blackley ADATC will have beds added in 2008. The legislature also approved \$6 million for the Department to go out into the private sector and secure services there.

- Secretary Benton stated that the Central Regional Hospital is expected to be completed in February 2008. The challenge that the Department will be facing now is carrying out the plans for shutting down Umstead and Dix and moving individuals to the new hospital. There has been discussion with Wake County about maintaining a facility at the Dix campus for a specified number of beds for the individuals who come in and need the level of service that would be in the seven day treatment window. Although Wake County has taken steps to securing local treatment beds here, they are about two years away from having those beds in place and available for use in the community service network. The Department is working with Wake County to come up with a business model that will allow for keeping some beds at Dix (less than 50) while Wake County gets those forty-four (44) beds that they are working with a private company (Holly Hill) to get those operational. The agreement is not in place, but we are in negotiation. That will be part of the Department's transition to the new hospital in the spring of 2008.
- Secretary Benton stated that Broughton Hospital in August received a sanction by the federal government, which is essentially a decertification of that facility for Medicaid type reimbursements. Secretary Benton further stated that although Broughton Hospital has a major task underway to deal with staffing and supervisory issues, there is a senior management team there on a regular basis with the existing staff, to try to get the corrections in place in order to regain good standing with the federal government. Secretary Benton stated that services are continuing to be provided there and individuals are getting good treatment.
- Secretary Benton discussed the relationship between the Department and the Commission and advised that Dr. Scheyett shared information with him and provided some of the strategic planning documents from earlier this year. Secretary Benton further added that he wanted to be sure that he and the Commission were working well together and that he welcomed the Commission serving in an advisory capacity to him.

Secretary Benton responded to the following inquiries:

- Laurie Coker, Commission member, expressed concern that a lot of providers still do not understand rehabilitative services. She added that she was pleased to see a letter from the Secretary addressing this issue. Ms. Coker also mentioned the importance of reporting structures, and evaluating accountability in relational structures between LMEs and the boards of county commissioners. Ms. Coker asked the Secretary if he could help ensure that statutes and policies that are already written be implemented.
 - Secretary Benton referred to the Mercer study and the attempts to address matters from a comprehensive perspective. He plans to review the statute Ms. Coker mentioned.

- Martha Martinet, Commission member, mentioned that individuals in Forsyth County, to include Laurie Coker and her, called together a group of community people who wanted to improve services in mental health. As a result, some foundations and fund raisers are now involved in this effort. They are seeking a consultant to come to Forsyth County to assist with this effort and she asked the Secretary if they could piggyback on the Mercer Study.
 - Secretary Benton responded that he would try to facilitate that conversation.
- Ellen Russell, Ex-Officio Committee member, asked why crisis services for individuals with developmental disabilities were not also being examined.
 - Secretary Benton stated that he would follow-up regarding her area of concern.
- Dr. Schwartz, Commission member, encouraged the Secretary to look from the “bottom up” as well as the “top down”. Dr. Swartz further stated that there are many clinicians who are concerned about some of the basic quality of clinical care and that there is a need to examine what is happening at the basic clinical level. Dr. Schwartz stated that they would like to have the opportunity to talk to the Secretary about the Work Force Development Initiative.
 - Secretary Benton stated that he is aware of the issue and that Dr. Scheyett had talked about social work and the professional licensing challenges. He added that he would look forward to hearing any additional concerns.

Presentation on “Recovery Based Treatment”

Dr. Charles Bernacchio, University of North Carolina School of Medicine, gave a presentation on “Recovery Based Treatment”. Dr. Bernacchio discussed Impairment, Dysfunction, Disability, and Disadvantages (particularly as related to the cumulative effects) of severe mental illness. He also addressed assumptions as well as evidence-based practices related to mental illness.

Dr. Bernacchio responded to questions from Commission members related to non-smoking in facilities. Dr. Bernacchio questioned whether this involved a blanket policy and stressed the importance of working with the individual to inform him/her of the risks of smoking and the addictive aspects of substances. Dr. Bernacchio mentioned medical implications of patient smoking and impact upon such disorders as diabetes and high blood pressure as well as consideration of quality of life issues.

Rules Committee Report

Dr. Anna Scheyett, Co-Chair, Rules Committee, presented the Rules Committee Report for the October 17, 2007 meeting in Floyd McCullouch’s absence. Dr. Scheyett reported that the Committee welcomed Mark Sullivan as a new Ex-Officio Committee member. Dr. Lancaster reported to the Rules Committee on the efforts of the work group on staff qualifications. The Clients Rights Rule generated a great deal of discussion; the final recommendation was that a workgroup comprised of Division Staff, Commission members, and consumer representatives work on the rule and report back to the Committee in January. This recommendation was made for the Criminal Justice rules as well. Dr. Scheyett cited recent legislation which raised the question whether the authority for Provider Endorsement rules continued to reside with the Secretary or had been given to the Commission. The Committee decided that the authority for the rule should be clarified and the rule presented to the Rules Committee in January. The Regions for Division Institutional Admissions rules will be presented to the Commission today.

Diane Pomper, Assistant Attorney General, NC Department of Justice, confirmed that recent legislation has given the authority for rules related to provider endorsement to the Commission.

Advisory Committee Report

Dr. Marvin Swartz, Chair, Advisory Committee, presented the Advisory Committee Report for the October 18, 2007 meeting. Dr. Swartz stated that the Advisory Committee has been engaged in discussions regarding prioritizing recommendations for the final report on the Workforce Development Initiative. The Committee also accepted suggestions from members for agenda items for the January 2008 Advisory Committee meeting. Dr. Swartz indicated that efforts to identify future agenda items will continue as the Workforce Development Initiative Report has been completed.

Presentation of Draft Workforce Development Initiative Report

Dr. Schwartz, Chair, Advisory Committee, presented the “*Draft Workforce Development Initiative Report*” to the Commission for adoption and recommendations for distribution. Emily Moore, Connie Mele, and Ann Forbes, Commission members, expressed concern that the nursing profession should be addressed in the report. Asked about dissemination of the Report, Dr. Swartz opined that it could be presented to the Joint Legislative Oversight Committee and perhaps to conferences/summits designed to “shine the light” on issues related to workforce development. Steven Hairston, Chief, Operations Support Section, DMH/DD/SAS, indicated that the Report could be distributed as follows: as a Communication Bulletin, by the Commission to the LOC and/or to the Workforce Development Board, and/or to other parties identified by the Commission.

Chairman McElroy opined that the report should be presented to the LOC as well as to local legislators to pursue legislative support for its recommendations.

Upon motion, second, and unanimous vote, the Commission adopted the draft Workforce Development Initiative Report with a recommendation that nursing information to be provided by Ann Forbes be included in the Report along with the additional recommendation posed by Dr. Shantzis..

10A NCAC 28F .0101 – Proposed Amendment of Regions for Division Institutional Admissions

Carol Donin, DMH/DD/SAS, State Operated Services, presented the proposed amendment of Regions for Divisional Institutional Admissions. The intent of this rule is to have a region/catchment area for each state facility that does not split Local Management Entities (LMEs) across facility regions. The three region model also distributes the population demographics in an equitable way for each facility and minimizes geographical/logistical issues for individuals who need to access the services of state operated facilities. This is a Commission rule and is presented to the Commission for approval to publish.

Upon motion, second and unanimous vote, the Commission approved the adoption of the proposed amendment of 10A NCAC 28F .0101 Regions for Division Institutional Admission for publication.

10A NCAC 27A .0400 – Proposed Adoption of Uniform Co-Payment Graduated Fee Schedule

Phillip Hoffman, Chief, Resource and Regulatory Management Section, DMH/DD/SAS, presented the proposed adoption of Uniform Co-Payment Graduated Fee Schedule. Session Law

2007-410, House Bill 628 “*An act to create a uniform co-payment schedule for MH/DD/SA Services*” enacted August 21, 2007 required that rules be adopted relative to a uniform co-payment schedule. The fee schedule will ensure that individuals/families whose income is below 300% of the poverty are not charged a fee and the determination and assessment of fees by LMEs and contractual providers are performed.

This is a Secretary rule and is presented to the Commission for information and comment.

Public Comment

Mary K. Short, Mr. and Mrs. Greenberg, William Hancock and Terri Miller spoke in opposition to the revised the Community Alternatives Program for Persons with Mental Retardation and other Developmental Disabilities (CAP-MR/DD) Family/Guardian Service Provision Policy. The Commission members requested that Division Staff supply them with reference material so that they could be briefed on the policy to determine how they might be of assistance in this matter. Paula Cox Fishman expressed concern regarding the status of ADVP services.

Adjournment

There being no further business, the meeting was adjourned at 2:25 p.m.